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**ADAMS EVANS P.A.**  
INTELLECTUAL PROPERTY ATTORNEYS

2180 Two Wachovia Center  
301 South Tryon Street  
Charlotte, North Carolina 28282-1991  
Telephone: (704) 375-9249  
Facsimile: (704) 375-0729

W. THAD ADAMS, III  
J. SCOTT EVANS  
STEPHEN S. ASHLEY, JR.  
MATTHEW J. LADENIUM  
JONATHAN AL. HINES  
RANDON C. TREGO

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**FACSIMILE TRANSMISSION**

TO: USPTO DATE: August 10, 2004  
Examiner: Not yet known  
Art Unit: 3611

FROM: W. Thad Adams, III FACSIMILE NO: (703) 872-9306  
Reg. No. 29,037

RE: **Our File No. 3144/15; U.S. Patent Application Serial No. 10/625,766 for "BABY CARRIAGE AND BABY'S CAR SEAT"**

CONFIRMATION COPY  
TO FOLLOW:

YES \_\_\_\_\_ NO ☒

NUMBER OF PAGES: Cover + 3

**MESSAGE:** Please see the Transmittal Letter; Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address; and Statement under 37 CFR 3.73(b) for the above-referenced patent application.

**Also, please confirm receipt of this facsimile. Thank you.**

If any problems in transmission occur, please contact Cecilia M. Sidebottom, Legal Assistant.

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PTO/SB/21 (02-04)

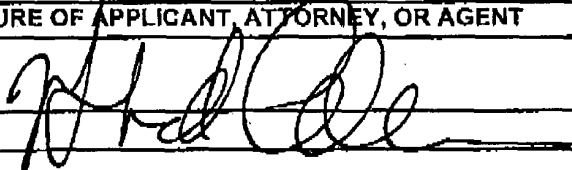
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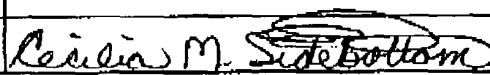
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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/625,766
	Filing Date	07/23/2003
	First Named Inventor	GONG
	Art Unit	3611
	Examiner Name	Not yet known
	Attorney Docket Number	3144/15
Total Number of Pages in This Submission		3

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statement under 37 CFR 3.73(b)
Remarks If there are any fees due in connection with this matter, please charge Deposit Acct. 01-0265.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	W. Thad Adams, III Reg. No. 29,037
Signature	
Date	08/10/2004

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Cecilia M. Sidebottom
Signature	
Date	08/10/2004

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PTO/SB/82 (09-03)

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**REVOCATION OF POWER OF  
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NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/625,766
Filing Date	07/23/2003
First Named Inventor	GONG
Art Unit	3611
Examiner Name	
Attorney Docket Number	3144/15

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I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

23638

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
Customer Number:

23638

OR

☐ Firm or  
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name

Signature

Date

(02 August 04)

Telephone

704-375-9249

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.

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PTO/SB/98 (08-03)

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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Michael Gong et al.Application No./Patent No.: 10/625,766Filed/Issue Date: 07/23/2003Entitled: BABY CARRIAGE AND BABY'S CAR SEATBritax Excelsior Limiteda corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or2. ☐ an assignee of less than the entire right, title and interest.The extent (by percentage) of its ownership interest is \_\_\_\_\_ %  
in the patent application/patent identified above by virtue of either:A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 014319, Frame 0321, or for which a copy thereof is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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(NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

2/8/04 (02 August 04)

Date

704-375-9249

Telephone number

A. J. STAFFORD

Typed or printed name

Signature

DIVISIONAL MANAGING DIRECTOR

Title

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